

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	(hr)	67817	4/28/60
O.I.P.E. CLASSIFIER		62188	5-2-60
FORMALITY REVIEW			7-22-60
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	N	N	
9	N	N	
10	N	N	
11	N	N	
12	N	N	
13	N	N	
14	N	N	
15	N	N	
16	N	N	
17	N	N	
18	N	N	
19	N	N	
20	N	N	
21	N	N	
22	N	N	
23	✓	✓	
24	N	N	
25	N	N	
26	✓	✓	
27	✓	✓	
28	✓	✓	
29	✓	✓	
30	✓	✓	
31	✓	✓	
32	✓	✓	
33	✓	✓	
34	✓	✓	
35	✓	✓	
36	✓	✓	
37	N	N	
38	N	N	
39	N	N	
40	N	N	
41	N	N	
42	N	N	
43	N	N	
44	N	N	
45	N	N	
46	N	N	
47	N	N	
48	N	N	
49	N	N	
50	N	N	

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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